

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HW	68904	2/9/00
O.I.P.E. CLASSIFIER	RSD		2/13/00
FORMALITY REVIEW		61001	2/22/00
RESPONSE FORMALITY REVIEW			

Best Available Copy

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	1/25/00
Original	1/25/00
1	✓
2	✓
3	✓
4	✓ ✓
5	✓ ✓
6	✓ ✓
7	✓ ✓
8	✓ ✓
9	✓ ✓
10	✓ ✓
11	✓ A
12	✓ ✓
13	✓ ✓
14	✓ ✓
15	✓ ✓
16	✓ ✓

Claim	Date
Final	
Original	
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Claim	Date
Final	
Original	
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Claim	Date
19	✓ ✓
20	✓ ✓
21	✓ ✓
22	✓ ✓
23	✓ ✓
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26	✓ ✓
27	✓ ✓
28	✓ ✓
29	✓ ✓
30	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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